

favor of it. So they are rightly concerned, and that is why polling numbers show the American people don't favor this legislation.

I think their instincts are right. I think we should listen to them.

I appreciate the effort to improve health care in America. I support a number of reform provisions, some of which are in this bill, but others could be a part of this bill to make health care more affordable, more effective, and help people who are having a hard time financing their insurance premiums. But the truth is, the bill doesn't really reduce the premium cost for most people. Many people who are paying their bills today are not going to get any reduction. In fact, they may see an increase. So for these reasons, I oppose the legislation, I thank the Presiding Officer, and I yield the floor.

The PRESIDING OFFICER. The Senator from Montana.

Mr. BAUCUS. Mr. President, I believe Senator DURBIN may be coming to the floor. In the meantime, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. DURBIN. Mr. President, I ask unanimous consent the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DURBIN. Mr. President, today, all day, we have been debating the health care reform bill, which has been a matter worked on in the Senate and the House for a solid year. I wish to salute the Senator from Wyoming, Mr. ENZI, who joined with several other Senators in, I understand, 61 separate meetings talking about this bill, in an effort which did not bear fruit as they hoped but was a bipartisan effort to come up with some solution to our health care situation in America. I hope we can still reach some bipartisan accommodation before this bill passes.

At this point in time, only one Republican Senator has voted for any form of Senate health care reform and that was Senator SNOWE in the Senate Finance Committee. We hope others will join us before this bill comes to final passage in the Senate, but that is the reality of the political situation.

The bill before us is over 2,000 pages long. Some have criticized its length. I defy anyone to write down, in 2,000 pages or less, a description of the current medical system in America. I think it would take many more pages to explain the complexity of the situation. But people across America understand a few basics.

Health insurance is reaching the point where it is not affordable. Families cannot afford to pay for it anymore, businesses cannot. Fewer people have coverage at their workplace, and many who go out into the open market cannot afford to pay the premiums. Today we have reached a point where our COBRA plan, which is health insur-

ance for those who have lost their job—we provided a helping hand to many unemployed people across America—it expired today. It picked up two-thirds of the premiums. I ran into people who said, even with the two-thirds picked up by the Federal Government, I still cannot afford it. So it is understandable that health insurance is no longer affordable, and it is not getting any better.

In the last 10 years, health insurance premiums have gone up 131 percent. We estimate that, in the next 8 years, the cost of health insurance will double. In 8 years, it is anticipated that families will spend up to 45 percent of their income on health insurance. That is not sustainable.

So the starting point is to find ways to bring down cost. The Congressional Budget Office gave us a report yesterday and said we are on the right track. I can come up with other ideas which I think might be more helpful, but this is the art of the possible. I think we are moving toward a model which will start to bring down costs.

The second thing we do that is critically important is, we expand coverage so it reaches 94 percent of Americans. Currently, there are about 50 million Americans without health insurance. These are people who are unemployed, folks who work at businesses that cannot afford health insurance or folks out on their own who cannot afford to pay for their own health insurance. We now reach a point with this bill where 94 percent of Americans have coverage. That is a good thing.

We also do it in a fiscally responsible way because this bill, according to the Congressional Budget Office, which is the neutral referee in this battle, according to that office, we will save, in the first 10 years of this bill, \$130 billion or more from our deficit. It will be the biggest deficit reduction of any bill considered by Congress. In the second 10 years, they estimate \$650 billion in savings. To think we have $\$3/4$ trillion dollars in deficit reduction in this health care reform says to me, in the eyes of the Congressional Budget Office and most observers, it is a fiscally responsible bill.

There is a section of the bill which I think is critically important too. Many people with health insurance find out that when they need it the most it is not there. The health insurance companies will deny coverage, saying they are dealing with preexisting conditions that were not covered, there is a cap on the amount they will pay, your child is now age 24 and is not covered by your family plan. All these things are excuses for health insurance companies to say no. When they say no, they make more money. We start eliminating, one by one, these perverse incentives for health insurance companies to say no.

We give consumers and families across America a fighting chance, when they actually need health insurance, that it will be there. Two out of three

people filing for bankruptcy today in America file because of medical bills. That reflects the reality, that we are each one accident or one diagnosis away from a medical bill that could wipe out our life savings. The sad reality is 74 percent of people filing for bankruptcy because of health care bills have health insurance, and it turns out it is not worth anything. When they needed it, it failed them.

We need to move to a point where the health insurance companies are held accountable, where when you pay premiums for a lifetime, the policy is there to cover you when you need it. That is what this is about.

We eliminate some of the most egregious discrimination in insurance premiums. The insurance industry is one of two businesses in America exempt from antitrust laws. So they literally get together, they collude and conspire when it comes to setting premium costs and allocating markets, and they can do it legally under the McCarran-Ferguson Act. Because of that, what they have done is to create discrimination against some people—women, certain age groups, people living in certain places—when it comes to premiums. We eliminate, by and large—not completely but by and large—this type of discrimination.

The other point that has been raised repeatedly is about Medicare. There is a pending amendment by Senator MCCAIN. As a Democrat, we take great pride in Medicare. It was a Democratic President, Lyndon Baines Johnson, who led a Democratic Congress in passing it. Very few, if any, Republicans supported it. Over the years, it has been a program we have stood behind as a party because we believe it has provided so much well-being for 45 million American, now today, seniors.

This bill starts to move us toward a place where you can basically say there is a sound economic footing for Medicare in the future. If we don't do something today, in 7, 8, or 9 years, the Medicare Program could go bankrupt. If we wait 5 years to do it, imagine what we will have to do then.

This bill moves in the direction of making Medicare more sound by eliminating some of the waste that is currently in the program.

There was a time when our friends on the other side joined us in saying this program could be more efficient. But now the McCain amendment says basically there should be no cuts in Medicare, even if the cut is in wasteful spending. Senator MCCAIN has a strong record on the Patients' Bill of Rights, but I think his amendment goes too far when it comes to Medicare. I hope that we can defeat it or that he will reconsider it.

The last point I want to make is that this debate will continue. We hope to move to amendments. If we get to a point where we are dealing with filibusters and slowdowns in an effort to run out the clock and make us all leave on Christmas Eve with the job not finished, many of us are going to get tired